PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER SMALL	THAN
T	OTAL CLAIMS		14				.	RATE		FEE	٦ ٔ	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	ΈE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/4 minus 20=					X\$ 9:			OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* /			X43=			OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT							<u> </u>	1	200-	
* If the difference in column 1 is less than zero, enter "0" in column 2								+145= TOTAL			OR	+290=	
$ \checkmark $	CLAIMS AS AMENDED - PART II								ַ [JOR	OTHER	THAN
<u>۵</u>	(Column 1) (Column 2) (Column 3							SMAL	LE	NTITY	OR	SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• /2	Minus	# X)	=		X\$ 9=		^ ^	OR	X\$18=	
	Independent	. /	Minus	***	}	=		X43≦		/	OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1		6A	+290=	
								TOTA		$\underline{\hspace{1cm}}$		TOTAL	
		P	NDDIT. FE	EL		10	ADDIT. FEE	-					
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		(Colunt HIGHE NUME PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=	T		OR	X\$18=	
	Independent		Minus	***		=		X43=	1		OR	X86=	
	FIRST PRESE	NTATION OF ML	LI IPLE DEF	ENDENT	CLAIM			+145=	1		OR	+290=	
							L	TOTA			\n_{\bullet}	TOTAL	
	(Column 1) (Column 2) (Column 3)											ODIT. FEE	
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	Т	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	419		= .		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	484		<u> </u>		X43=	Ť		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								†			+290=	
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										·	OR .	TOTAL	
***	f the "Highest Nur	mber Previously Pa mber Previously Paid ber Previously Paid	ld For IN THE	S SPACE is	less tha	n 3, enter "3,"		ODIT. FEE Id in the a		priate box		DOIT. FEE	